## <u>APPLICATION FORM – Education Advisor and English Language Program</u> <u>Assistant</u>

| 1. P   | osition                        | Applying fo                    | r:   |                           |   |                            |  |     |
|--|--------------------------------|--------------------------------|--|---------------------------|---|----------------------------|--|-----|
| 2. N   | 2. Names First:                |                                |  |                           | <b>::</b>   |                            | Last:  |     |
| 3. Address   |                                |                                |  |                           |   |                            |  |     |
|  | you h                          |                                | tives or mem                                   | nbers of yo               | our househo   | old who wor                | k for the US   | Y/N |
|  | •                              | •                              | y completed a<br>ns or Busines                 |                           | r's Degree  | in Education               | n, Science, the Liberal  | Y/N |
| IF YES   | Namo                           | e of Institution               | on:  | Dates of Attendance:      |   |                            |  |     |
|  | •                              | your current<br>se list your l | salary? If y<br>ast salary.                    | ou are no                 | currently   | working                    | WST:   |     |
| 7. Do you have a current, clean and valid Samoan Driver's License? |                                |                                |  |                           |   |                            |  |     |
| te<br>sti<br>de  | rtiary,<br>udents<br>evelopi   | technical in<br>on U.S. un     | nstitutes etc<br>iversity app<br>sive of staff | c.) that in<br>dication/a | volves the<br>admissions  | counseling,<br>s procedure | er education (e.g.<br>/advising of<br>es or community<br>formal teaching | Y/N |
| IF YES: 1  | Please l                       | list the follow                | ving details f                                 | or one or                 | more empl   | oyers:                     |  |     |
| Employer<br>Position T<br>Summary                                  | itle:                          | ne of Emplo                    | yer):  |                           | Years/Mor   | nths of Empl               | oyment:  |     |
| Employer<br>Position T<br>Summary                                  | itle:                          | ne of Emplo                    | yer):  | ,                         | Years/Mon   | ths of Emplo               | oyment:  |     |
| 9. Are you eligible to work in Samoa?                              |                                |                                |  |                           |   |                            |  | Y/N |
|  | 10. U S citizenship Y/N status |                                |  |                           | 11. Eligible for US Veterans Hiring Preference? (Are you a U.S. Veteran?) |                            |  |     |